

## **HABILITATION, COMMUNICATION**

### **Service Description**

**HP16-00**

Services provide a variety of interventions designed to maximize the functioning of persons with developmental disabilities. Services may include, but are not limited to: habilitative therapies, special developmental skills, behavior intervention and sensorimotor development.

This service provides a variety of interventions designed to maximize the functioning of Division members in need of communication assistance based on habilitation outcomes designed by the planning team [e.g., Individual Support Plan (“ISP”) team]. Interventions may include activities typically delivered by the service of Hourly Habilitation Support, but are not limited to those activities. The emphasis is to provide communication development of teaching strategies by an individual trained in sign language, picture exchange program, assistive technology and/or augmentative communication systems, and to assist caregivers to acquire skills to improve the member’s communication.

### **Service Requirements and Limitations**

1. This service may be provided in the following settings:
  - 1.1 The member’s home, or
  - 1.2 The member’s community.
2. This service shall not be provided while the member is attending day treatment and training.
3. This service shall not be provided when the member is hospitalized.
4. This service shall not be provided to members living in group homes, developmental homes, skilled nursing facilities, Intermediate Care Facilities (“ICFs”), or Level I or Level II behavioral health facilities.
5. This service does not include services that are governed by a certification or licensure board.
6. This service shall not be provided to members younger than three (3) years of age.
7. At least one (1) direct observation for each new direct service staff shall be made by the Qualified Vendor within the first ninety (90) days of their hire start date when the direct service staff is present.

### **Service Goals and Objectives**

#### Service Goals

1. To facilitate the removal of barriers related to social interaction and independent functioning through increasing communication.
2. To enable the member to acquire knowledge and skills and be a valued member of his/her community based on his/her own choices.

### Service Objectives

The Qualified Vendor shall ensure that the following objectives are met:

1. In accordance with the member's planning document (e.g., ISP), assist in developing:
  - 1.1 Individualized, time-limited outcomes that are based on assessment data and input from the member and the member's representative which allow the member to achieve his/her long-term vision for the future and priorities.
  - 1.2 A specific teaching strategy for each habilitation outcome within ten (10) business days following the initiation of service for a new or a continuing placement and whenever a new outcome has been identified for the member. The specific teaching strategy for each outcome shall identify the schedule for implementation, frequency of services, data collection methods, and the steps to be followed to teach the new skill.
  - 1.3 Communication techniques and skills, implementation of strategies proven to be effective for the member, and establishing and strengthening caregivers' skills.
  - 1.4 Changes to specific/outcome(s) and/or strategies, as agreed upon by the member's planning team, based on the presence or absence of measurable progress by the member.
2. Based upon identified needs in the planning document, consult with other team professionals regarding communication needs.
3. Each direct care staff implements the planning document and applicable behavioral plan for the member and follows the protocols for responding to and reporting incidents to the Division.
4. As identified in the member's planning document, provide training and/or assistance to the member's family and caregivers that is based on the priorities and needs as established to increase and/or maintain targeted communication skill acquisition of the member.
  - 4.1 With input from the member and family/caregivers, develop strategies for habilitation outcomes that can be carried out in context of the member's daily routine.
  - 4.2 Communicate with the family/caregivers regarding how the support plans are working when the worker is not present.

- 4.3 Based upon the presence or absence of measurable progress, consult with appropriate professionals on the team to make changes to outcome(s) and/or strategies, as agreed upon by the planning team.

### **Service Utilization Information**

1. The planning team shall decide, prior to the delivery of services, how service delivery will be monitored.
2. Typical utilization:
  - 2.1 For members three (3) to ten (10) years of age: two (2) hours per week. Service sessions shall not exceed one (1) hour per session. Maximum authorized utilization shall not exceed twenty-four (24) months.
  - 2.2 For members over ten (10) years of age: up to one (1) hour per week. Maximum authorized utilization shall not exceed twelve (12) months.
  - 2.3 Any exception to the above outlined utilization must be approved by the Division's District Program Manager/designee.
  - 2.4 When identified by the planning team as an appropriate strategy, the member may be seen in a joint session with other professionals.
3. This service is to be identified by the planning team separately from other habilitation service needs and is expected to provide intensive services to increase and/or maintain targeted communication skills of the member.

### **Rate Basis**

1. Published. The published rate is based on one (1) hour of direct service.
2. Throughout the term of the contract, the appropriate billing codes, billing units, and associated billing rules are subject to change. All billing codes and billing units, and associated billing rules will be included in the Division's Policies and Procedures Manual, Billing Manual, *RateBook*, and/or other provider resources made available by the Division.

### **Direct Service Staff Qualifications**

Direct service staff must have:

1. An Associate's degree in a related field and/or Assistive Technology Certification and/or Teacher's Aide Certification with two (2) years of experience in communication related activities such as sign language, assistive technology, augmentative communication with knowledge of behavior management and/or adaptive activities; five (5) years of experience as described above can be substituted for degree/certification certificate; or

2. A Bachelor's or Master's degree in education, therapy or related field with specialty training in sign language, assistive technology, augmentative communication with knowledge of behavior management and/or adaptive activities.

### **Recordkeeping and Reporting Requirements**

1. The Qualified Vendor shall submit the teaching strategies that were developed for the member's habilitative outcomes to the member's Support Coordinator for planning team review no later than ten (10) business days following the initiation of service for a new or a continuing placement and whenever a new outcome has been identified for the member.
2. The Qualified Vendor shall submit quarterly individualized progress reports on the member to the member's Support Coordinator and the member/member's representative. The quarter is based on the member's annual planning cycle. The first quarterly progress report is due no later than the fifteenth (15<sup>th</sup>) day following the end of the quarter in which the service is initiated. Subsequent quarterly progress reports are due no later than the fifteenth (15<sup>th</sup>) day following the end of the quarter.
  - 2.1 At a minimum, the report shall include a written summary describing specific service activities, overall progress specific to planning document outcomes, performance data that identifies the member's progress toward achievement of the established outcomes, and current and potential barriers to achieving outcomes.
3. The Qualified Vendor shall maintain daily records on file as proof of the number of hours worked by each direct service staff providing direct service to members.
  - 3.1 Each time sheet, equivalent document, or data system must contain the original signature or other independent verification of the member/member's representative after service delivery confirming hours worked. Proof of hours worked must be signed or verified by the member/member's representative before the Qualified Vendor submits the claim for payment.
4. The Qualified Vendor shall maintain data that demonstrates full compliance with all programmatic and contractual requirements of the Department and the Division.